

Request for Appropriation Budget Template

Enter data into each yellow cell.

Request Title:	New Choices Waiver Billing Rate Increase
Sponsor:	Rep. Raymond Ward

Step 1. Revenue			
Funding Source			
Amount Requested	\$ 584,000.00	Utah Medicaid Fund (estimated state portion for Medicaid New Choices Waiver Case Management Reimbursement Rate)	
Other Revenue Sources		N/A	
Total Revenues:	\$ 584,000.00		
Difference between Revenue & Expenditures			\$ -
Step 2. Expenditures			
Amounts		Details	
Personnel	\$ -	Number of personnel supported:	n/a
Travel	\$ -	Nature of travel:	n/a
Equipment/Supplies	\$ -	Types of equipment/supplies to be purchased:	n/a
Pass-through	\$ 584,000.00	Intended recipient(s) of pass-through funds:	2000 clients and 20 Medicaid New Choices Waiver Case Managemet Agencies
Licenses	\$ -	Description of licenses (number, cost per license, etc.)	n/a
Other	\$ -	Description of other expenses	n/a
Total Expenditures:	\$ 584,000.00		